

1617
JW

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/060,754
		Filing Date	January 30, 2002
		First Named Inventor	Jeffry B. Skiba
		Group Art Unit	1617
		Examiner Name	Leonard M. Williams
Total Number of Pages in This Submission	10	Attorney Docket Number	125827-1000

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	• Acknowledgment Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	Monique A. Vander Molen Gardere Wynne Sewell LLP
Signature	Monique A. Vander Molen
Date	November 8, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	Kelli A. Ivey		
Signature	Kelli Ivey	Date	11-8-04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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FEE TRANSMITTAL For FY 2005

Effective 10/01/03. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **\$81.00**

METHOD OF PAYMENT (Check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 07-0153

Deposit Account Name: Gardere Wynne Sewell LLP

The Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
1001	790	2001	395	Utility filing Fee	\$
1002	350	2002	175	Design filing fee	\$
1003	550	2003	275	Plant filing fee	\$
1004	790	2004	395	Reissue filing fee	\$
1005	160	2005	80	Provisional filing fee	\$

SUBTOTAL (1) **\$ N/A**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims		Fee from below		Fee Paid
Total Claims						
Independent Claims	20	- 29**	= 0	x 9.00	= \$	81.00
Multiple Dependent Claims	3	- 3**	= 0	x 43.00	= \$	
						280.00 = \$

Large Entity		Small Entity		Fee Description
Code	Fee (\$)	Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	88	2201	44	Independent Claims in excess of 3
1203	300	2203	150	Multiple dependent claim, if not paid
1204	88	2204	44	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **\$ 81.00**

** or number previously paid, if greater; For Reissues, see above

Complete if Known

Application Number	10/060,754
Filing Date	January 30, 2002
First Named Inventor	Jeffrey B. Skiba
Examiner Name	Leonard M. Williams
Group Art Unit	1617
Attorney Docket Number	125827-1000

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	\$
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	\$
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	\$
18042	920*	1804	920*	Requesting publication of SIR prior to Examiner action	\$
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	\$
1251	110	2251	55	Extension for reply within first month	\$
1252	430	2252	215	Extension for reply within second month	\$
1253	980	2253	490	Extension for reply within third month	\$
1254	1,530	2254	765	Extension for reply within fourth month	\$
1255	2,080	2255	1,040	Extension for reply within fifth month	\$
1401	340	2401	170	Notice of Appeal	\$
1402	340	2402	170	Filing a brief in support of an appeal	\$
1403	300	2403	150	Request for oral hearing	\$
1451	1,510	1452	1,510	Petition to institute a public use proceeding	\$
1452	110	2452	55	Petition to revive - unavoidable	\$
1453	1,370	2453	685	Petition to revive - unintentional	\$
1501	1,370	2501	685	Utility issue fee (or reissue)	\$
1502	490	2502	245	Design issue fee	\$
1503	660	2503	330	Plant issue fee	\$
1460	130	1460	130	Petitions to the Commissioner	\$
1807	50	1806	50	Processing fee under 37 CFR 1.17(g)	\$
1806	180	1806	180	Submission of Information Disclosure Stmt	\$
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	\$
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	\$
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	\$
1801	790	2801	395	Request for Continued Examination (RCE)	\$
1802	900	1802	900	Request for expedited examination of a design application	\$

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **\$ N/A**

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Monique A. Vander Molen	Registration No. (Attorney/Agent)	53,716	Telephone	(214) 999-4330
Signature	<i>Monique A. Vander Molen</i>			Date	Nov. 8, 2004

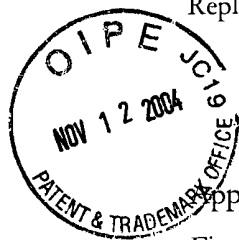
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If you need assistance in completing the form, call 1-800-0PTO-9199 (1-800-786-9199) and select option 2.

Application No. 10/060,754
Amendment dated October 6, 2004
Reply to Office Action dated November 8, 2004

Attorney Docket No. 125827-1000



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/060,754
First Named Inventor : Jeffry B. Skiba
Filing Date : January 30, 2002
Title : EYE MEDICATION DELIVERY SYSTEM
Group Art Unit : 1617
Examiner : Leonard M. Williams
Confirmation No. : 8210

MAIL STOP: AMENDMENT

Commissioner for Patents
P. O. Box 1450
Alexandria, Virginia 22313-1450

CERTIFICATE OF MAILING

I hereby certify that this response is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: MAIL STOP: AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on November 8, 2004.


Signature

Kelli A. Ivey
Typed or printed name of person signing certificate

AMENDMENT

Sir:

Applicants submit this response to the non-final Office Action mailed October 6, 2004. In view of the following Remarks/Arguments, Applicants respectfully request reconsideration and withdrawal of the restriction requirement, and allowance of the claims pending in this application.

In response to the Office Action, please amend the above-identified application as follows:

Listing of Claims beginning on page two (2) of this paper; and

Remarks/Arguments beginning on page six (6) of this paper.

11/15/2004 HDEMESS1 00000014 070153 10060754
01 FC:2202 81.00 DA